



**North Carolina Department of Health and Human Services**  
**Division of Mental Health, Developmental Disabilities and Substance Abuse Services**  
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Michael F. Easley, Governor  
Carmen Hooker Odom, Secretary

Michael Moseley, Director

December 16, 2005

**MEMORANDUM**

**TO:** LME Directors  
LME Contact Persons for Atypical Antipsychotic Medication Program

**FROM:** Mike Lancaster, MD  
Art Eccleston, Psy.D.

**RE:** Eligibility for Atypical Antipsychotic Medication Program and Medicare-Part D

With the impending implementation of the new Medicare - Part D prescription drug benefit, the Division of Mental Health, Developmental Disabilities and Substance Abuse Services finds it necessary to change the eligibility criteria for participation in the Division's Atypical Antipsychotic Medication Program, which is funded at the direction of the North Carolina General Assembly. This change will affect all current participants in the program who receive Medicare health coverage.

As you know, Medicare recipients are now eligible to receive the Medicare – Part D prescription medication coverage benefit. There are Medicare – Part D plans available in North Carolina that include the same atypical antipsychotic medications that are also covered by the Division's Atypical Antipsychotic Medication Program.

**Effective May 15, 2006 all persons, who are enrolled in the Division's Atypical Antipsychotic Medication Program and are also Medicare-Part D eligible will no longer be authorized to participate in the Division's Atypical Antipsychotic Medication Program.** We believe this change is consistent with the General Assembly's intent that the state-funded program be reserved for individuals who do not qualify for other programs to assist them with the purchase of these vital medications.

In order to assist the individuals affected by this decision, please assess the Medicare-Part D eligibility of the consumers under your care or whose care you oversee/manage, who participate in the Division's Atypical Antipsychotic Medication Program. Please be prepared to offer assistance to these persons to determine the best plan provider to select for the Medicare – Part D benefit (<http://www.dhhs.state.nc.us/mhddsas/medicare-d/>). Such assistance could consist of:

- identifying the plan(s) that cover both the consumer's atypical antipsychotic medications and his/her other prescribed medications;



- informing the person about the qualifications to receive financial assistance with Part D; and
- determining the least costly plans with respect to monthly premium, deductible, and co-pay.

Please inform consumers who are dual eligible, (i.e., eligible for Medicaid and Medicare) that they will be automatically enrolled by the Center for Medicaid and Medicare into a Medicare – Part D prescription drug plan.

To assist the Division in providing the program benefit to people who are unable to afford their atypical antipsychotic medications, please submit Change/Update forms as soon as possible to the Clinical Policy office, indicating the persons who will be de-authorized from the Division's Atypical Antipsychotic Medication Program due to being eligible for Medicare – Part D.

If you have any questions or need further information about this, please contact Mike Lancaster, MD or Art Eccleston, Psy.D. at 919-733-7011 or by email at [michael.lancaster@ncmail.net](mailto:michael.lancaster@ncmail.net) or [art.eccleston@ncmail.net](mailto:art.eccleston@ncmail.net). Thank you.

cc: Secretary Carmen Hooker Odom  
 Allen Dobson  
 DMH/DD/SAS Executive Leadership Team  
 DMH/DD/SAS Management Leadership Team  
 State Facility Directors  
 Carol Duncan Clayton  
 Patrice Roesler  
 Kory Goldsmith  
 Chair, Coalition 2001  
 Chair, Commission for MH/DD/SAS  
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